

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2540 / 4979

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Marco Rubio for President

A. Full Name (Last, First, Middle Initial)

DR. MICHAEL E. MCKEEVER D.D.

Mailing Address 7670 PRINCEVALLE ST , GILROY

City	State	Zip Code
GILROY	CA	95020-5022

FEC ID number of contributing federal political committee.

C

Name of Employer
DENTIST

Occupation
SELF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

415.00

Transaction ID : SA17.1143378

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		06		2016

CONTRIBUTION

Amount of Each Receipt this Period

25.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)

MR. DESMOND MCKELLEN

Mailing Address 1270 N. WICKHAM RD #16

City	State	Zip Code
MELBOURNE	FL	32935-8301

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Transaction ID : SA17.1149577

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		15		2016

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

MRS. LOIS D. MCKENNA

Mailing Address 4970 SENTINEL DRIVE APT 306

City	State	Zip Code
BETHESDA	MD	20816-3568

FEC ID number of contributing federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Transaction ID : SA17.1064249

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		03		2016

CONTRIBUTION

Amount of Each Receipt this Period

250.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

1275.00

Total This Period (last page this line number only).....